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CONFIRMATION NO. 6269

<b>SERIAL NUMBER</b> 10/533,640	<b>FILING OR 371(c) DATE</b> 11/15/2005 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 26728U
<b>APPLICANTS</b> Daniel Yachia, Herzliya, ISRAEL; Eran Hiroszowicz, Ramat Gan, ISRAEL;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL03/00915 11/04/2003				
<b>** FOREIGN APPLICATIONS *****</b> ISRAEL 152630 11/04/2002				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 37
Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> 20529				
<b>TITLE</b> Implantable device which is freely movable in a body cavity				
<b>FILING FEE RECEIVED</b> 1815	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	